



MONMOUTHSHIRE EDUCATION COMMITTEE.

REPORT OF THE
PRINCIPAL SCHOOL MEDICAL
OFFICER FOR THE
YEAR 1955.

GWYN ROCYN JONES,

M.A., M.D., B.Chir., D.P.H.,

Principal School Medical Officer.

COUNTY HALL,
NEWPORT, MON.

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MONMOUTHSHIRE EDUCATION COMMITTEE.

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TO THE CHAIRMAN AND MEMBERS OF
THE EDUCATION COMMITTEE.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit my Annual Report upon the work of the School Health Service for the year ended 31st December, 1955.

As in previous years, the Report deals chiefly with the general scheme of medical inspection and treatment of the school children of the County, and the statistical tables have been prepared in accordance with those set out by the Ministry of Education.

The average daily attendance at schools for the whole year, including day nursery schools, was 50,478.

Staff.

Of the 28 Medical Officers on the Staff on 31st December, 1955, all were engaged in the joint work of the School Health Service and Maternity and Child Welfare.

The services of 6 Consultant Specialists were available during the whole year, and details of the Clinics held are mentioned later. Dr. Brand discontinued his School Paediatric Clinic after April, 1955, and saw his cases at the various Hospitals.

The School Nursing and Health Visiting Services of the Council are co-ordinated, having the services of 45 Health Visitors or School Nurses for the whole County. The actual time devoted to School Nursing was equivalent to that of 14.7 full-time nurses.

SCHEME FOR MEDICAL INSPECTION.

This has been carried out in conformity with the requirements of the Ministry of Education, a full medical examination of each child being arranged at each of three periods of school life. Infants are examined during their first year of school life and where this occurs before the child reaches the compulsory school age of five years, the examination is repeated the following year. Children at Nursery Schools are medically examined at intervals of four months, and are constantly under supervision of health visitors.

During the last year at a primary school, children receive another full medical examination before proceeding to a secondary school. A further examination is carried out during the last year of compulsory school life. In the case of these leavers the examinations are arranged early in the school year so that any medical recommendations made may be dealt with before the pupil leaves school. Any pupils who continue to attend school after the age of fifteen years are medically examined each year afterwards.

In cases where defects are reported at medical inspection, action is taken to obtain further examination and treatment by reference to Consultants at our School Clinics or at Hospitals.

Inspection.

MEDICAL INSPECTIONS.—The numbers of children examined in the Primary and Secondary Schools were:—

<i>Monmouthshire</i> (excluding <i>Abertillery and</i> <i>Ebbw Vale</i>								
			<i>Div. Executive)</i>	<i>Abertillery</i>	<i>Ebbw Vale</i>	<i>Total</i>		
Periodic Inspections ... ..	...	...	11,890	1,246	1,696	14,832		
Re-examinations and Specials ...	...	...	5,171	957	440	6,568		

DENTAL INSPECTIONS.—The numbers of school children examined by the School Dentists were:—

<i>Monmouthshire</i> (excluding <i>Ebbw Vale</i> , including <i>Abertillery</i>)				<i>Ebbw Vale</i>	<i>Total</i>
36,670				2,744	39,414

CLEANLINESS.—The usual survey of school children was carried out by the Health Visitors:—

<i>Monmouthshire</i> (excluding <i>Ebbw Vale</i> , including <i>Abertillery</i>)				<i>Ebbw Vale</i>	<i>Total</i>
Examinations made were ... ..	...	...	69,649	6,864	76,513
Number of individual pupils found unclean ... ..	...	...	1,324	53	1,377

Treatment.

The following Specialist Services were available during the year for treatment at School Clinics of children referred by School Medical Officers during their routine work:—

<i>Clinic.</i>	<i>Specialist.</i>	<i>No. of Sessions held.</i>
Rheumatic and Heart ...	Professor A. G. Watkins, M.D., M.R.C.S., F.R.C.P. ...	One per month.
Ear Nose and Throat ...	D. B. Sutton, F.R.C.S., M.R.C.S., L.R.C.P. ...	Two per month.
Surgical	J. T. Rice Edwards, F.R.C.S., M.R.C.S., L.R.C.P. ...	One per month.
Orthopaedic	D. N. Rocyn Jones, M.A., M.D., F.R.C.S. ...	One per week.*
Ophthalmic	G. W. Hoare, M.A., M.B., F.R.C.S., M.R.C.S., L.R.C.P. ...	One per week.*
Paediatric	R. Vaughan Jones, M.B., CH.B., D.O.M.S., F.R.C.S. ...	One per week.*
	T. A. Brand, M.D., CH.B., D.C.H. ...	One per month.

(Discontinued April, 1955).

*In addition to the above routine clinics, Mr. Nathan Rocyn Jones held certain additional sessions bringing his total number of sessions for the year up to 102.

Mr. G. W. Hoare and Mr. R. Vaughan Jones also held a number of additional clinics.

The above Specialists held their clinics at the Central Clinic, Stanley Road, Newport, with the exception of Mr. D. N. Rocyn Jones, who visited various County Clinics as the demand arose.

Children requiring plastic surgery for defects such as hare-lip, cleft-palate, severe scarring, etc., were referred to Mr. Emlyn Lewis, F.R.C.S., who held out-patients clinics at St. Lawrence Plastic Surgery Hospital, Chepstow, and also at the Royal Gwent Hospital, Newport. The operations were carried out at the St. Lawrence Hospital.

School Clinics.

Details of School Clinics as at the end of 1955 and their situation and types of cases treated or examined are as follows:—

<i>Situation.</i>	<i>Average No. of Weekly Sessions.</i>	<i>Nature of School Clinics held.</i>
Central School Clinic, Stanley Road, Newport.	2.5	Ophthalmic, treatment and consultation.
	0.25	General Surgical, consultation.
	3.0	Ear, Nose and Throat, consultation and treatment.
	0.2	Orthopaedic, treatment and consultation.
	0.25	Paediatric, consultation. (Discontinued April, 1955.).
	0.25	Heart and Rheumatic, consultation.
	8.0	Orthoptic, treatment.
	4.0	Speech Therapy, treatment.
	10.0	Dental (including Orthodontic).
	10.0	Physiotherapy, treatment.
	1.0	Minor Ailments, treatment.
	1.0	Miscellaneous medical examinations.
	2.0	Defective vision, refractions.
	0.5	Child Guidance.
Ashgrove House, George Street, Pontypool.	9.0	Dental (including Orthodontic).
	2.0	Defective vision, refractions.
	2.0	Speech Therapy.
	0.2	Orthopaedic.
Beaumont House, Bloomfield Road, Blackwood.	10.0	Dental (including Orthodontic).
	2.0	Defective vision, refractions.
	0.2	Orthopaedic.
	1.0	Speech Therapy.
School Clinic, 59, Commercial Street, Abertillery	7.0	Dental
	2.0	Defective vision, refractions.
	0.2	Orthopaedic.
	4.0	Speech Therapy.
School Clinic, Armoury Hill, Ebbw Vale.	2.0	Minor Ailments.
	4.0	Dental.
	2.0	Defective vision, refractions.
	0.2	Orthopaedic.
School Clinic, Church Street, Tredegar	2.0	Minor Ailments.
	4.0	Speech Therapy.
	2.0	Dental.
	2.0	Defective vision, refractions.
School Clinic, Boverton House, Chepstow.	1.0	Speech Therapy.
	1.5	Dental.
	0.2	Orthopaedic.
	0.5	Mobile Clinic visits for defective vision refractions.
School Clinic, Old Barclay's Bank Buildings, Rhymney.	2.0	Speech Therapy.
	1.0	Dental.

<i>Situation.</i>	<i>Average No. of Weekly Sessions.</i>	<i>Nature of School Clinics held.</i>
School Clinic, Health Centre, Blaenavon.	2.0	Dental.
School Clinic, Park Place, Risca.	3.0 0.25	Dental. Defective vision, refractions.
Workmen's Hall, Llanhilleth.	0.5 1.0	Dental. Minor Ailments.
Leven House, Abergavenny.	2.0 2.0	Speech Therapy. Mobile Clinic visits for Dental Treatment.
	0.25	Mobile Clinic visits for defective vision refractions.
School Clinic, Ty Brith, Usk.	0.25 0.25	Mobile Clinic visits for Dental Treatment. Mobile Clinic visits for Defective vision refractions.
School Clinic, Ashfield Road, Newbridge.	4.0 2.0 0.2	Dental. Speech Therapy. Orthopaedic.

MOBILE SCHOOL CLINIC.

A modern travelling School Clinic was used entirely for Dental Treatment in country areas.

A similar vehicle, equipped for refractions, was used in similar areas for treatment of defective vision.

Except in the cases of the School Clinics at Ebbw Vale, Church Street, Tredegar, and the Mobile Dental Clinic, all the premises were also used for the work of Maternity and Child Welfare.

All school children attended the Clinics by appointment. In the case of certain emergency dental treatment, however, every effort was made for the treatment to be given with as little delay as possible.

Stanley Road School Clinic, Newport.

It is with pleasure that I have to record that at the end of March, 1955, a very extensive series of alterations, improvements and decorations were commenced at this Clinic. Owing to the nature and scope of alterations it was necessary to close the Clinic in the main for a month, during which time only urgent cases were dealt with under emergency arrangements. The work actually extended over several months, but with the co-operation of builders, patients and staff, the difficult period was overcome with a minimum of inconvenience. As a result of the work, it was possible to provide a large common waiting room, light, airy and comfortable. This room has convenient access to all clinics. A specialist consulting room with ante-room facilitates the various clinics there, whilst the Speech Therapy and Orthoptic Clinics can now be held independent of any other. A Gymnasium was fitted up in the basement, with the provision of a special cork floor, so that children may exercise without disturbing other clinics. The Ophthalmic Clinic is now provided with a pleasant room which enables the examiner to take advantage of the full 6 metres and this room is also available and equipped for the Ear, Nose and Throat Surgeon's examinations.

Further, the Dental Surgery has now been fitted entirely with modern equipment, including X-ray unit, and has adjoining a dental workshop, which can be used as a dark-room.

Provision has been made also for the housing of the Child Guidance Clinic which is now held in the premises.

The whole building is heated by gas convector heaters, and the decorations are all of pleasing nature. New furniture and cupboards to take the place of the old unsuitable ones, together with the provision of a pram-shelter, bring the Clinic up to a very desirable standard.

Speech Therapy.

Speech Therapy Clinics were held during the year 1955 at 10 centres, and were staffed at the commencement of the year by three full-time speech therapists and one part-time.

In September, 1955, we were unfortunate in losing the services of Miss Mary Knight, who married and left the district. Miss Knight had been a full-time officer, and her departure necessitated a re-arrangement of sessions after 30th September, 1955, to the following:—

Abertillery	4 half-day sessions per week (average).
Blackwood	1 " " " " "
Pontypool	2 " " " " "
Ebbw Vale	4 " " " " "
Newport	4 " " " " "
Tredegar	1 " " " " "
Newbridge	2 " " " " "
Chepstow	2 " " " " "
Abergavenny	2 " " " " "
Neville House, Garndiffaith ...	2 " " " " "

In most cases attendances were weekly, but in some instances in cases under observation they were not so frequent. Periods of attendance vary considerably, from a few months to several years, according to the type of defect. Individual treatments were usually of half-an-hour's duration.

284 children were treated during the year under review, 2,452 attendances being made. 8,985 appointments were made, but many were not kept. Attempts were made in the more dilatory cases to impress the importance of continuing the treatment. Some of the cases only realised this when the question of employment had to be considered. 25 cases were discharged from the Clinics for non-attendance and 3 for unsuitability. 93 were discharged as cured, 5 left school. There were 44 discharges for other reasons.

Orthoptic Treatment.

During 1955, 3 sessions per week were held at the Stanley Road, Newport, School Clinic by Mrs. H. M. Gregory (née Miss H. M. Davies). On February 21st, 1955, Mrs. Angela G. Hearne, D.B.O., joined the Orthoptic Staff and attended full-time. Mrs. Hearne continued her full-time service until July, 1955, when she had leave of absence until December, 1955. A locum tenens orthoptist, Mrs. Patricia Edith Hannah, was obtained, and during Mrs. Hearne's absence worked 4 sessions per week.

The Orthoptic Clinic was held under the direction of the Ophthalmic Surgeons attending the Clinic and cases were referred by the latter for assessment of squint, etc., and also for treatment of squint by means of exercises, etc.

The Orthoptic Clinic during 1955 dealt with the examination of 412 new cases, a total of 2,277 attendances being made. Of the 38 cases discharged from the Clinic, 16 were cured, 15 were improved and not likely to benefit from further treatment, and 6 as having no squint. 629 appointments were not kept.

The cases referred for operative treatment, mentioned below, passed through the Orthoptic Clinic.

Operative Treatment for Squint.

Following their examinations by the Ophthalmic Surgeons, suitable cases were referred for operative treatment at the County Hospital, Griffithstown. 197 cases were operated upon for squint during the year.

Ear, Nose and Throat Ailments.

There continued to be a large demand for Ear, Nose and Throat treatment of school children and, as in previous years, a special clinic was held once or twice weekly at the Central Newport Clinic. Here cases were primarily examined by a Medical Officer who has had considerable experience in the work, and cases suitably dealt with either with treatment on the spot, by reference direct to a Hospital or by reference to a visiting specialist at the School Clinic.

Many cases of children requiring operative treatment for tonsils and/or adenoids were notified direct to this Department by private practitioners, and were referred direct to the County Hospital, Griffithstown, or The Aberbargoed and District Hospital, where they were re-examined by the visiting Ear, Nose and Throat Surgeon.

During the year 1955, 72 operating sessions were held at the County Hospital, Griffithstown, by Mr. J. L. D. Williams, F.R.C.S., for removal of tonsils and/or adenoids. 609 cases were operated upon, including cases where proof-puncture of antrum was also carried out. 146 names were removed from the waiting list following a preliminary examination by the surgeon, or for other reasons. There were also 45 preliminary consultation sessions, at which 552 children were examined, and 62 children re-examined.

The number of names added to the waiting list at the County Hospital during the year was 651 as compared with 1,136 in 1954, and the number on the list on 31st December, 1955, was 99 compared with 194 in 1954.

At the Aberbargoed and District Hospital 252 operations were carried out by Mr. Peter Thorpe, F.R.C.S., for removal of tonsils and/or adenoids. 93 children were given a preliminary examination, and found not to require operation.

A further 90 operations were carried out in the area of the Divisional Executive.

General Surgical Treatment.

Mr. J. T. Rice Edwards held a monthly clinic for cases where a general surgeon's opinion was required. When operative measures were advised, the treatment was arranged by the Medical Superintendent of the County Hospital, Griffithstown, at which hospital the operations were carried out. Follow-up of post-operation cases were also arranged at the clinic. 59 new cases were examined and there was a total attendance of 112.

Paediatric Clinic.

Dr. T. A. Brand, a Specialist in Children's Ailments, held a monthly clinic at Stanley Road Clinic, Newport, and there examined cases of obscure disease which were referred to him by School Medical Officers. Pupils who were likely to be categorised as Delicate Pupils were also referred to him with regard to suitability for admission to our Mounton House Special Residential School for Delicate Pupils. Parents of children found to be suitable for the School were offered admission of the pupils as soon as possible afterwards.

Until the end of April, 1955, Dr. Brand had seen 14 new cases, and there were a total of 39 attendances. However, owing to the pressure of other work, Dr. Brand had to discontinue his School Clinic sessions, but was kind enough to offer to continue his services to our school children *via* the

Hospital Services. Appointments were thereafter made for children to see him at hospitals, and Dr. L. A. Knowlson, of this staff, undertook the duties of supervising all admissions to Moun-ton House School. Dr. Brand sends to this Department copies of his reports upon all school children examined by him at his various Out-Patients' Departments, and these notes are added to the School Medical Record Cards, thus providing valuable information to School Medical Officers at their School Medical Inspections.

Heart and Rheumatic Clinic.

Professor A. G. Watkins continued to hold his monthly Heart and Rheumatic Clinic session at the Stanley Road Clinic, where he saw cases referred to him by School Medical Officers and General Medical Practitioners. He also examined cases of suspected heart disease discovered by the X-ray examinations carried out by the Mass Radiography Service in their routine examinations of pupils. 37 new cases were examined, and there were a total of 232 attendances. 6 cases were recommended for admission to Hospital and this was arranged.

Orthopædic Clinic.

A large number of orthopædic defects are referred to our School Orthopædic Clinic and are dealt with by Mr. D. Nathan Rocyn Jones, Consultant Orthopædic Surgeon. In addition to the more serious conditions, numerous cases of flat feet are referred to him together with numerous instances of postural defects. Surgical appliances are prescribed and obtained where necessary, and there is close liaison between the Clinic and the Royal Gwent Hospital, Newport, the County Hospital, Griffithstown, and the Prince of Wales Orthopædic Hospital, Cardiff, where cases are referred for in-patient treatment.

Cases for Physiotherapy are referred by Mr. Rocyn Jones to the Physiotherapy Department at the Stanley Road Clinic, where there is an Orthopædic Sister who has had special experience in treating cases of cerebral palsy, etc. Physiotherapy cases are also referred to the County Hospital, Griffithstown, and other hospitals, whilst our own Orthopædic Sister holds a special exercises clinic at Blackwood and Rhymney.

Owing to the large number of cases requiring observation or follow-up examinations, in November, 1955, our Dr. Rhiannon Morgan began to attend the Orthopædic Clinics, and thence commenced follow-up clinics of her own, thus relieving the considerable pressure on the Consultant Orthopædic Clinic.

Also held is a weekly clinic at Stanley Road for supervision of supplied appliances, etc. This is held by our own Orthopædic Sister.

At Mr. Rocyn Jones' Clinic he examined 720 new cases and there was a total attendance of 1,609.

155 new cases for physiotherapy attended the Stanley Road Clinic, and made a total of 2,346 attendances.

Tuberculosis.

30 children were referred by School Medical Officers for examination by Chest Physicians, and the results of the examinations were:—

	Total Cases	Positive Results	Doubtful Results
For examination re Lungs	24	—	—
For examination re Glands	5	—	1
For examination re Spine or Bones	1	—	—

Other Treatment.

Details of other treatment given may be found in later pages.

REPORT OF PRINCIPAL SCHOOL DENTAL OFFICER.

During the year 1955, the County School Dental Service had the services of Mr. E. F. Sumner as Principal School Dental Officer with the assistance of Mrs. Greta McHarg, Mr. John C. Morley and Mr. D. J. Coughlin as full-time dentists, and also Mr. W. S. Hazell as a part-time dentist serving in the Ebbw Vale area of the Ebbw Vale, Abertillery, Nantyglo and Blaina Divisional Executive Committee. Mr. R. V. Clarke also joined the staff as a full-time dentist on January 10th, 1955.

In September, 1955, the Special Services Sub-Committee decided to advertise for two additional dentists but until the end of the year there were no applicants.

School Clinic premises situated in convenient parts of the County offer modern facilities for dental treatment, the surgeries being equipped with up-to-date installations. X-ray equipment is available in several cases. The needs of the rural areas are catered for by means of a modern mobile dental surgery, which visits the country schools and carries out the treatment on the spot.

Details of the numbers of pupils dentally inspected and treated are set out in Table V. These figures refer to the usual dental filling and extraction operations, but in addition 520 children requiring more specialised orthodontic treatment were dealt with. Orthodontic Clinics were held by Mr. E. F. Sumner at Newport, Pontypool, Blackwood and Chepstow, and a total of 2,120 attendances were made. At these Clinics children were examined and provided where necessary with dentures. County dental technicians made, and there were supplied, 159 regulation appliances, 3 complete dentures and 105 partial dentures. Repairs to existing dentures were also carried out. 241 X-ray examinations were also made at the School Dental Clinics.

Clinics for the promotion of dental hygiene were held by the School Dental Hygienist, who worked under the close supervision of the Principal School Dental Officer. The Hygienist took pains to impress upon pupils the necessity for dental cleanliness and care, and good results were particularly noticeable in girls who were shortly to leave school and had recently become more careful of their personal appearance!

An improved standard of dental hygiene is noted in the area worked by the Dental Hygienist, and a gratifying feature is that pupils frequently themselves make applications for treatment.

1,300 children received treatment by scaling and polishing, and 2,504 attendances were made. Sodium fluoride applications were made at this clinic, and also many cases were treated there in conjunction with orthodontic treatment. 1,031 cases were referred to the Hygienist's Clinic following Dental Inspections at Schools.

Although the School Dental Service is mainly one of conservation, it is of course a comprehensive one, dealing with the alleviation of toothache as well as other phases of dentistry. However, it was disturbing throughout the year to receive so many applications for emergency treatment for toothache, particularly as so many of these cases were those in which treatment appointments had previously not been kept. In numerous cases this was due to apathy on the part of the parents, but in some cases it was just taken for granted that the School Dental Service would always be at hand for such contingencies. Every opportunity was taken to point out to the attending parent that such pain and extractions may have been unnecessary had previous offers of treatment been accepted. In some cases it would seem that a child had suffered intermittent toothache for some time, but suddenly it had become so severe as to interfere with the parents' rest, when the emergency suddenly became acute, and a demand was made to the School Dental Service for immediate extraction!

PROVISION OF SCHOOL MEALS AND MILK (INCLUDING THE DIVISIONAL EXECUTIVE AREA).

There are at present 234 School Canteens providing meals, free of charge or on payment, to 327 School Departments.

The average daily number of children provided with meals is as follows:—

Free	2,176
On Payment	17,146
Total	19,322

Milk is supplied free of charge for drinking purposes. During a dispute with milk sellers during part of the year, liquid milk was for a time not supplied, and its place was taken by the distribution of milk tablets.

HANDICAPPED PUPILS.

The sub-joined table gives details of the Handicapped Pupils on the register.

Suitable education of all the children in the various categories of Handicapped Pupils is indeed a difficult problem, each requiring, as it does, specialised treatment. In a County Area there has seemed to be no other method than the residential school system, except in the cases of certain educationally sub-normal pupils who may be dealt with in special classes in ordinary schools in the more densely populated areas and certain deaf and partially deaf pupils, for whom special arrangements are being considered. This also applies to partially-sighted children. Not having all types of special schools in our County, resort has, in some cases, to be made to the use of schools under the control of other Authorities. We have, however, a residential school at Hilston Park, Monmouth, which caters for educationally sub-normal boys, of 11 to 16 years of age, and one at The Mount, Chepstow, taking maladjusted boys of 7 to 15 years of age.

We also have a Special Residential School for Delicate Pupils at Moun-ton House, Pwllmeyric, near Chepstow, accommodating 40 boys and 40 girls between the ages of 5 years and 16 years. 18 places were reserved for the use of children nominated by the County Borough of Newport Education Committee.

BLIND AND PARTIALLY BLIND PUPILS are admitted to special schools by arrangement with the Authorities who have such institutions and have accommodation for cases in addition to their own.

DEAF AND PARTIALLY DEAF CHILDREN. Children coming to the notice of the Principal School Medical Officer from any source, such as school medical inspection, school nurses, head teachers, parents, etc., as being suspected of having defective hearing, are referred to our Central School Clinic at Stanley Road, Newport. Here they are examined by Mr. D. B. Sutton, F.R.C.S., Consultant Aural Surgeon, and if necessary referred to the Royal Gwent Hospital for audiometric investigation. Following a report upon this investigation, they are re-assessed by the Aural Consultant and suitable cases referred to the Director of Education for admission to special schools. Where desirable, a child continues to attend an ordinary school with the help of a hearing-aid. Cases with special difficulties are referred to further specialists such as Professor A. W. G. Ewing, of the Department for Education of the Deaf at Manchester, and his recommendations carried out.

A reorganisation of the arrangements for dealing with deaf and partially deaf children is now proceeding, with a view to being able to determining degree of deafness in the early months of life wherever possible. A Medical Officer specially designated for this work has already obtained a promise from a Department dealing with this as a speciality that she will be able to attend and receive a special course of training there. The new scheme will no doubt involve the provision of deaf-aids for the very

young, a home teacher experienced in auditory training and the organisation of clinics for the detection, identification and follow-up of these children.

In cases of multiple defects, where there is mental retardation, particular difficulty is experienced in their placement, as normal intelligence is usually required to enable the pupil to benefit from the special methods of education.

During the year 1955, 157 pupils were examined for the first time under Section 34 of the Education Act, 1944, and 61 children were re-examined under this Section. 123 were examined under Section 57.

As a result of examination by a specially approved Assistant Medical Officer under Section 34 of the Education Act, 1944, and re-examination under Section 57 (3) of the same Act, 34 pupils (21 boys and 13 girls) were transferred to the care of the Local Health Authority as being incapable of receiving education at school. Under Section 57 (5) of the same Act, certain pupils were specially examined during the last term of attendance at school and 20 (10 boys and 10 girls) transferred to the care of the Local Health Authority as requiring supervision after leaving school.

25 pupils were referred to the Principal School Medical Officer for examination under Section 34 of the Education Act, 1944, as being possibly educationally sub-normal, but on investigation were not found to fall within these categories.

Cerebral Palsy—"Spastics."

"Spastics" is the layman's synonym for Cerebral Palsy and is generally applied to children suffering from the effects of brain damage sustained before, during, or after birth, damage which shows itself in many forms of greater or less severity depending upon the site of the brain lesion and its extent. Fortunately the vast majority are so slightly affected that they can take their place in ordinary schools, but it is regretted that in the County as a whole 27% are so severely handicapped as to be termed "ineducable" and placed on the Register of Mental Defectives. It is only in recent years that Society has recognised the special needs of cerebral palsied children and the first school in Great Britain erected and equipped specially for them was only opened in 1946. Recent medical research and consequent improvement in methods of diagnosis and treatment has revolutionised the outlook for many of these afflicted children, and it has been proved that the handicap, physical and/or mental, can be considerably lessened if the cases are diagnosed early enough and efficient training and treatment begun. Even a child believed to be mentally defective can sometimes resume his place in the educational system.

In the country as a whole the proportion of children in the age group 0—16 known to suffer from cerebral palsy is 1—1,000 and of these children one half are so slightly handicapped that they attend an ordinary School (Report of Chief Medical Officer, Ministry of Education 1950-1). These figures should, however be treated with some reservation as an exhaustive investigation of the problem has only been undertaken in a few County boroughs and not at all by a County Council. However, according to these figures and with an estimated child population of 77,000 (*i.e.*, between the ages of 0—16) one might expect to find in Monmouthshire 77 children of various ages afflicted with cerebral palsy.

In October, 1954, a thorough survey of the County was made to estimate exactly the problem in Monmouthshire, a task which was completed in 1955. With the help of the school Health Department, 66 cases were notified, but much probing and searching revealed a further 45 making a total of 111 or 1.4 per 1,000. The home of each child was visited so that diagnosis could be confirmed and the child's physical, mental and social needs assessed.

Very early in the survey it became apparent that in many cases the special needs of afflicted children were not being met, and that if the objective of the Authority to ensure that these children could

become useful and independent citizens was to be realised certain problems would have to be tackled and special measures adopted, viz:—

- (a) Physical disability and provision of necessary treatment and training.
- (b) Education according to the mental capacity of the child and which would have to be combined with active and continuing medical treatment.
- (c) How best to ensure early diagnosis.
- (d) Further training and education after school leaving age for the permanently handicapped.

It was decided, therefore, that a comprehensive Scheme should be worked out and a register compiled of all cerebral palsied children to ensure (1) early and accurate diagnosis; (2) provision of medical treatment and suitable education; (3) a system of follow-up from the time of notification until the child should become an independent adult.

(a) Physical Treatment.

As the damage to the brain shows itself commonly in paralysis and loss of function of muscles and joints the services of an orthopaedic surgeon of consultant status are imperative, together with physiotherapists specially trained in the work. Mr. N. Rocyn Jones, F.R.C.S., undertook the duties of orthopaedic consultant, and the Regional Hospital Board made available a physiotherapist specially trained in this work in this Country and America. A screening clinic is held monthly at Stanley Road, Newport, when new cases are investigated and a definite programme of therapy organised for each child.

Investigation has revealed that there is infinite variety in these cases and no two are alike. Not only may there be the obvious paralysis or paresis of limb or limbs, there may be interference with the mechanism of speech, the child may be blind or have difficulty in focussing objects, he may be deaf, he may have difficulty in swallowing food, general physical and/or mental development be retarded, the child may have a normally functioning brain but it may work at a slower rate and some children may show no physical stigmata at all, but may be lacking in stamina and incapable of normal physical and/or mental effort. To treat so many varied defects the services of additional consultants are required and these are freely obtainable through the school clinics.

Cases are called for re-examination from time to time so that progress can be measured and the programme altered accordingly.

(b) Education.

As these children flourish best in the security of a happy home, and in a normal school environment, every effort is made for them to hold their place in the ordinary school stream, and at least one child, although so severely handicapped physically that he cannot walk unaided and is only now learning to write, is holding his place in a Grammar School. Attendance at the clinic and periods of hospitalisation interfere with normal education; but special arrangements are made so that the loss is minimised. There remain a number of children too severely handicapped to attend ordinary school, or whose homes are inadequate or too remote, and provision has been made for them to attend special residential schools. Finally there are the "ineducable" children and for them some provision has already been made for their daily attendance at Occupation Centres where they receive training and teaching according to their capacity combined with physiotherapy and speech therapy.

(c) Early Diagnosis.

Medical opinion is agreed that the earlier the age at which diagnosis is made and treatment begun, the better is the ultimate prognosis of the cerebral palsied child. But early diagnosis is difficult and specialised, as the "spasticity" so apparent in later years does not develop until months have elapsed. There are other early symptoms, however, and abnormalities which may appear within hours after

birth and which are significant to the trained diagnostician. The establishment of the Developmental Diagnostic Clinic should provide the answer to this problem.

(d) Not all children of average intelligence recover sufficiently to find ready employment when they reach school leaving age. The Ministry of Labour provides a number of training centres for physically handicapped persons in various parts of the country, but there is none in Monmouthshire. At the Occupation Centre, Garndiffaith, there is a workshop for boys together with accommodation and training in the domestic and other arts for girls. Advantage is taken of the facilities there for "spastics" unable to find suitable employment. Training in several forms is available, together with daily physiotherapy and speech therapy and good progress is being made which will be speeded up when full facilities will become available throughout the County with the opening of the workshops at Tredegar, and Hafodyrynys.

Cerebral Palsy Survey in Monmouthshire.

Age Groups.				Males.	Females.	Total.		
A—School age	48	31	79	111	135
B—Under School age	...	...	...	22	10	32
C—Over School age	...	...	...	16	8	24
A—School Age.				Males.	Females.	Total.		
1. Attending ordinary school, and presumed normal intelligence	13	12	25	56 (73%)	79
2. Attending ordinary schools but E.S.N....	...	...	...	7	2	9
3. Attending special residential schools	...	...	...	12	3	15
4. Not attending school, but having home teaching	...	...	...	4	2	6
5. At present in hospital (long stay)	—	1	1	23 (27%)	
6. Ascertained mental defectives:								
(a) Attending occupation centres	...	...	...	4	4	8
(b) On Waiting List—Occupation Centre	...	...	...	5	4	9
(c) Unsuitable for Occupation Centre	2	2	4		
(d) Awaiting examination	...	...	...	1	1	2
B—Under School Age.								
1. Probably of normal intelligence and likely to go to normal school	13	6	19	32	
2. Severely handicapped physical and/or mental	...	...	...	9	4	13
C—Over School Age.								
1. Ascertained mental defectives and attending Occupation Centre	9	4	13	24	56
2. Ascertained mental defectives on waiting list—Occupation Centre	...	...	...	1	1	2
3. Working and not mentally defective	...	...	...	6	3	9
				86	49	135	135	

Child Guidance.

Maladjustment in children is a term first used in the 1920's to describe the manifestations in children of these symptoms, which if untreated, lead to delinquency and disharmony in the home, being in fact the precursors of mental sickness. When it is realised that 40% of all hospital beds in Britain are occupied by the mentally sick or mentally deficient, the importance of the treatment of maladjustment in children can be easily appreciated.

The publication in October, 1955, of the Report of the Committee on Maladjusted Children was very opportune. Child guidance Clinics may be provided by Regional Hospital Boards or by a local education authority. As Monmouthshire does not support a teaching hospital, the services of the full psychiatric staff is not available and so the organisation of a Child Guidance service rests with the local authority, the Principal School Medical Officer being given authority for their general functioning (according to 1955 Report).

In the approved Child Guidance Service, the school medical service and school psychological service are co-ordinated under the leadership of a psychiatrist who may be employed by the local authority or lent by the Regional Hospital Board.

During the year this service was reorganised following the Regional Hospital Board making available to the Authority the service of Dr. D. F. Vaughan Johnston, Assistant Psychiatrist, St. Cadoc's Hospital. A pilot service was organised in the Mental Health Department and held its first session at Stanley Road Clinic, in December, and 9 cases were treated before the end of the year. The clinic meets twice a month and applications for appointment are so numerous that there can be no doubt that this Service will meet a great need.

Epilepsy.

A register is maintained of these cases, but their medical care continues to be carried on by the family doctors and consultant physicians and pædiatricians, and in some cases the E.E.G. unit at St. Cadoc's Hospital has been of great assistance.

Admission to special schools and institutions for suitable cases has been maintained and some are in attendance at the Occupation Centre.

A preliminary survey gave the following information regarding children of school age :—

			<i>Attending</i>		<i>At</i>				
			<i>Normal</i>		<i>Special</i>		<i>M.D.</i>		<i>Total.</i>
			<i>Schools.</i>		<i>Schools.</i>				
Boys	...	...	28	...	3	...	12	...	42
Girls	...	...	25	...	3	...	12	...	40
			<hr/>		<hr/>		<hr/>		<hr/>
Totals	...		53	...	6		24		82
			<hr/>		<hr/>		<hr/>		<hr/>

Home Training and Occupational Therapy are available for the home bound epileptic mental defective who are unable to attend an Occupation Centre.

Convalescence.

There were no children in Convalescent Homes during the year.

Handicapped Pupils.

	<i>No. admitted to Special Schools during 1955. (a)</i>	<i>No. in Special Schools on Jan. 1st, 1955, and for whole or part of 1955. (b)</i>	<i>No. not in Special Schools. (c)</i>	<i>Total on Register. (d)</i>		
Blind Pupils	—	7	2	9		
Partially Sighted	—	9	11	20		
Deaf	3	33	7	43		
Partially Deaf	1	4	4	9		
Delicate	29 ⁽¹⁾	46	96	171		
Epileptic	1	5	4	10 ⁽²⁾		
Physically Handicapped..	6 ⁽³⁾	5 ⁽⁴⁾	32	43 ⁽⁵⁾		
Speech Defect	—	—	4	4		
Multiple Defects	15	28	55	98 ⁽⁶⁾		
			<i>Total number on register recommended for Special School.</i>	<i>No. under observa- tion.</i>	<i>Recommended for Tuition in ordinary schools and not requir- ing Residential Treatment.</i>	<i>Total on Register.</i>
Educationally Sub-normal	17 ^{(7) (8)}	36 ⁽⁹⁾	163	155	180	551 ⁽¹⁰⁾
Maladjusted	5 ^{(11) (12)}	3 ^{(13) (14)}	16	19	4	47 ⁽¹⁵⁾

- (1) Excluding 1 admission to Special School where main defect is not "Delicate."
 (2) Excluding 3 transfers to Local Health Authority in 1955.
 (3) Excluding 2 admissions to Special Schools where main defect is not "Physically Handicapped."
 (4) Excluding 2 in Special Schools where main defect is not "Physically Handicapped."
 (5) Excluding 2 transferred to Local Health Authority in 1955.
 (6) Excluding 10 transferred to Local Health Authority in 1955.
 (7) Excluding 5 admissions to Special Schools where main defect is not "Educationally Sub-normal."

- (8) Excluding 1 admission by Educational Psychologist.
 (9) Excluding 14 in Special Schools where main defect is not "Educationally Sub-normal."
 (10) Excluding 54 transfers to Local Health Authority in 1955.
 (11) Excluding 7 admissions to Special Schools where main defect is not "Maladjusted."
 (12) Excluding 1 admission by Educational Psychologist.
 (13) Excluding 7 in Special Schools where main defect is not "Maladjusted."
 (14) Excluding 4 in Special Schools via Educational Psychologist.
 (15) Excluding 7 transferred to Local Health Authority in 1955.

PREVENTION OF TUBERCULOSIS.

During the first half of 1955 arrangements were made for tuberculin skin tests to be carried out on most of the school entrants and leavers during the school year. An explanatory letter was sent to the parent of each pupil, asking for consent for the proposed investigation and for X-ray examination if necessary or advised. The distribution of the letters was effected by the co-operation of Head Teachers, who gave information as to the numbers required. 11,942 letters and consent forms were sent out and 7,573 consents received, a consent rate of 63%. 191 schools were visited by Medical Officers or Health Visitors and in the main Jelly Patch Tests were carried out, some of which were confirmed later by Mantoux tests.

Skin tests were carried out on 3,170 entrants and positive results were obtained in 343 cases, a rate of 11%. In the case of leavers, skin tests were carried out on 2,763 pupils, and of these 717 yielded positive results, a percentage of 26 of the leavers tested. This was a smaller percentage than usually obtained. Unfortunately many pupils were absent or not available at the time of the visit for the application of the test or its later reading.

As part of the whole scheme for the prevention of tuberculosis in schools, arrangements were made with the Mass Radiography Service of the Welsh Regional Hospital Board for X-ray examination of many of the same pupils, for whom parent's consent had been obtained. A mobile X-ray unit visited the County in April—May, 1955, and investigation of school children was carried out at 8 centres, 4 of which were at schools. The centres were as widely distributed as possible, and were placed so as to be within easy reach of the greatest possible number of pupils from their respective schools. Where the distance was too great for walking, free transport was provided to and fro. All parties of pupils were accompanied by a teacher or teachers. Arrangements were made for all the consenting leavers to attend for X-ray examination together with all entrants who had given a positive tuberculin skin test but here again many of the leavers did not attend, although it was pleasing to note that nearly all of the recommended entrants attended with a parent.

Following the notification of a case of active tuberculosis in a member of the teaching staff at a Junior Mixed School in the Bedwas and Machen Area, an investigation of the school was carried out. Parents' consents were received in respect of 135 children of the 170 on the register. 133 children were Mantoux tested but only 124 were available for reading of the results. 2 were positive and 122 negative.

The two positive reactors were examined by X-rays at Caerphilly Chest Clinic, with normal results in both cases.

At a small country school it was reported that the milk supplier was a case of active tuberculosis. Following this 124 children were patch tested with 21 positive results. The 21 were referred to the Newport Chest Clinic when 16 were reported as normal, 3 did not keep the appointment and the remaining 2 were referred for further observation by the Chest Physician.

In October, 1955, the Mass Radiography Service carried out a survey of the general population at Tredegar, when 279 consenting pupils were X-rayed, irrespective of age. All were found to be normal except 2. One of these two was found to be a healed primary pulmonary tuberculosis and the other was to be kept under observation by the Chest Physician.

Where it was not possible to X-ray positive-reactor entrants at the Mass X-ray unit arrangements were made for this to be done at Chest Clinics. In no case was there evidence of active tuberculosis in an entrant but 4 cases of healed primary tuberculosis were reported. Amongst the infants the X-ray examinations suggested the possibility of heart abnormality in 4 cases, but these were all examined at the County Heart and Rheumatic School Clinic and found to be normal.

3,446 leavers attended the various centres for X-ray examinations. 6 cases were recommended for clinical examinations and of these 4 were found to be normal and 2 had atrial defect. 42 cases were referred to Chest Physicians for further examinations and active pulmonary tuberculosis was diagnosed in 4 cases. Also one case of probable active tuberculosis was found, 1 required to be admitted to hospital for observation, 1 was a healed primary pulmonary tuberculosis for observation, 1 was an active primary complex and 7 others were for observation.

I should like to express my thanks to the Welsh Regional Hospital Board Mass Radiography Staff for the assistance and co-operation which was afforded to my Department in the investigation and also to the Chest Physicians for their help with the follow-up examinations. I am also grateful to our Director of Education's Special Services Department for so efficiently arranging the provision of transport.

MEDICAL EXAMINATION OF ENTRANTS TO COURSES OF TRAINING FOR TEACHING, AND TO THE TEACHING PROFESSION.

In accordance with the directions given in the Ministry of Education Circular No. 249, medical examinations of candidates for admission to Teachers' Training Colleges were carried out and completed forms 4 R.T.C. were forwarded to the respective Principals. In addition, medical examinations, including X-ray of chest by chest physicians were carried out and reported on Form 28 R.Q. The following tables set out the number of examinations, and results:—

On Form 4 R.T.C.

<i>Medical Category.</i>	<i>Males.</i>	<i>Females.</i>
A.1	60	148
A.2	6	56
B.1	3	1
B.2	—	—
C.	—	—
Total	69	205

On Form 28 R.Q.

<i>Medical Category.</i>	<i>Males.</i>	<i>Females.</i>
A.1	3	2
A.2	1	2
C.	4	4

EMPLOYMENT OF CHILDREN.

Under the Byelaws made on the 5th of April, 1949, by the Monmouthshire County Council in respect of employment of children and street trading, 499 children were medically examined by School Medical Officers during the year. The examination was required in order to ensure that such employment would not be prejudicial to a child's health or physical development and would not render him/her unfit to obtain proper benefit from education at school. 223 examinations were carried out in 1954.

ACCIDENTS TO SCHOLARS AT SCHOOL.

Cases in which pupils had sustained accidents within the precincts of the Committee's Schools were notified by Head Teachers to the Director of Education, and a copy forwarded to my Department. In order to safeguard the interests of the Education Committee each child was visited by a School Nurse as soon as possible after the notification in order to see that proper medical attention had been obtained. 875 such visits were made during the year. This is a marked increase on the 435 for 1954.

MISCELLANEOUS MEDICAL EXAMINATIONS

During 1955, 365 medical examinations were carried out by School Medical Officers, and these included applicants for posts as school canteen workers, etc. There were also a certain number of examinations carried out at the request of the Youth Employment Officer in cases where school leavers had missed the routine School Medical Inspection owing to absence. The figure of 365 compares with 147 for 1954.

MEDICAL INSPECTION RETURNS.

Monmouthshire. (Not including the Divisional Executive Area).

TABLE I

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools.

A. PERIODIC MEDICAL INSPECTIONS.*

Number of Inspections in the prescribed Groups:—

Entrants	4,750
Second Age Group	3,267
Third Age Group	2,690

Total	10,707
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Number of other Periodic Inspections	1,183
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Grand Total	11,890
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B. OTHER INSPECTIONS.

Number of Special Inspections	1,402
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Number of Re-Inspections	3,769
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Total	5,171
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C. PUPILS FOUND TO REQUIRE TREATMENT.

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTIONS TO REQUIRE TREATMENT
(excluding Dental Diseases and Infestation with Vermin).

Group (1)	For Defective Vision (excluding squint) (2)	For any of the other conditions recorded in Table IIA (3)	Total individual pupils (4)
Entrants	61	656	596
Second Age Group	143	303	421
Third Age Group	129	237	361
Total	333	1,196	1,378
Other Periodic Inspections ...	14	61	73
Grand Total	347	1,267	1,451

*See Scheme for Medical inspection on page 1.

TABLE II

A. Return of Defects found by Medical Inspection during the Year.

Defects Code No.	Defect or Disease (1)	PERIODIC INSPECTIONS No. of Defects		SPECIAL INSPECTIONS No. of Defects	
		Requiring treatment (2)	Requiring to be kept under observation but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation but not requiring treatment (5)
4.	Skin	22	155	8	4
5.	Eyes—				
	(a) Vision ...	347	397	55	49
	(b) Squint ...	94	157	8	14
	(c) Other ...	15	48	1	6
6.	Ears—				
	(a) Hearing ...	36	63	6	5
	(b) Otitis Media ...	64	116	1	5
	(c) Other ...	6	26	3	5
7.	Nose or Throat ...	375	860	47	53
8.	Speech	57	124	35	15
9.	Cervical Glands ...	58	292	2	13
10.	Heart and Circulation ...	18	170	5	24
11.	Lungs	78	334	15	26
12.	Developmental—				
	(a) Hernia ...	11	20	—	1
	(b) Other ...	14	124	3	18
13.	Orthopaedic—				
	(a) Posture ...	61	216	12	1
	(b) Flat Foot ...	187	279	21	27
	(c) Other ...	82	198	15	10
14.	Nervous System—				
	(a) Epilepsy ...	9	20	3	8
	(b) Other ...	10	68	3	7
15.	Psychological—				
	(a) Development ...	21	53	23	14
	(b) Stability ...	7	39	4	6
16.	Other	32	77	20	17

B. Classification of the General Condition of Pupils Inspected during the Year in the Age Groups.

AGE GROUPS.	No. of pupils inspected.	(A) (Good)		B (Fair)		C (Poor)	
		No.	% of col 2	No.	% of col 2	No.	% of col 2
Entrants (1)	(2) 4,750	(3) 2,454	(4) 51.66	(5) 2,231	(6) 46.97	(7) 65	(8) 1.37
Second Age Group	3,267	1,581	48.52	1,639	50.10	47	1.48
Third Age Group	2,690	1,674	62.23	1,001	37.22	15	.55
Other Periodic Inspections ..	1,183	1,173	99.31	9	.69	1	—
Total	11,890	6,882	57.88	4,880	41.03	128	1.09

TABLE III.

(Including the Abertillery, Nantyglo & Blaina Area).
Infestation with Vermin.

(1) Total number of examinations in the schools by the school nurses or other authorized persons	69,649
(2) Total number of individual pupils found to be infested	1,324
(3) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (2) Education Act, 1944)	—
(4) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (3) Education Act, 1944)	—

TABLE IV.

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS).

Group I.—Diseases of the Skin (excluding uncleanliness, for which see Table III).

	Number of cases treated or under treatment during the year	
	By the Authority.	Otherwise.
Ringworm—(i) Scalp	—	9
(ii) Body	—	2
Scabies	—	—
Impetigo	2	32
Other skin diseases	—	—
Total	2	43

Group II.—Eye Diseases, Defective Vision and Squint.

	<i>Number of cases dealt with.</i>	
	<i>By the Authority.</i>	<i>Otherwise.</i>
External and other, excluding errors of refraction and squint	12	19
Errors of Refraction (including squint)	1,817*	1,054
Total	1,829	1,073
Number of pupils for whom spectacles were—		
(a) Prescribed	1,020*	636
(b) Obtained	Not known	Not known

Group III.—Diseases and Defects of Ear, Nose and Throat.

	<i>Number of cases treated.</i>	
	<i>By the Authority.</i>	<i>Otherwise.</i>
Received operative treatment—		
(a) for diseases of the ear	—	—
(b) for adenoids and chronic tonsillitis	—	861
(c) for other nose and throat conditions	—	164
Received other forms of treatment	150	200
Total	150	1,225

Group IV.—Orthopaedic and Postural Defects.

(a) Number treated as in-patients in hospitals	118	
	<i>By the Authority.</i>	<i>Otherwise.</i>
(b) Number treated otherwise, e.g., in clinics or out-patient departments	147	579

Group V. and VI.—Child Guidance Treatment and Speech Therapy.

	<i>Number of cases treated.</i>	
	<i>By the Authority.</i>	<i>Otherwise.</i>
Pupils treated—		
(a) under Child Guidance arrangements	9	2
(b) under Speech Therapy arrangements	284	Not known

*Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

(This Table includes the Abertillery, Nantyglo and Blaina Area of the Divisional Executive.)

(1)	Number of pupils inspected by the Authority's Dental Officers—									35,910
	(a) Periodic age groups	...	...	...	...	...	...	...	...	760
	(b) Specials	...	...	...	...	...	...	...	...
								Total (1)	...	36,670
(2)	Number found to require treatment	...	...	...	...	...	...	...	...	24,663
(3)	Number offered treatment	...	...	...	...	...	...	...	...	18,752
(4)	Number actually treated	...	...	...	...	...	...	...	...	13,405
(5)	Attendances made by pupils for treatment	...	...	...	...	...	...	...	...	17,268
(6)	Half-days devoted to : Inspection	...	...	...	...	...	...	...	...	266
	Treatment	...	...	...	...	...	...	...	...	1,774
								Total (6)	...	2,040
(7)	Fillings : Permanent Teeth	...	...	...	...	...	...	...	...	5,802
	Temporary Teeth	...	...	...	...	...	...	...	...
								Total (7)	...	5,802

Abertillery and Nantyglo & Blaina Areas of the Divisional Executive.

TABLE 1

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools.

A. PERIODIC MEDICAL INSPECTIONS.*

Number of Inspections in the prescribed Groups:—

Entrants	517
Second Age Group	443
Third Age Group	286

Total	1,246
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Number of other Periodic Inspections	—
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Grand Total	1,246
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B. OTHER INSPECTIONS.

Number of Special Inspections	871
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Number of Re-Inspections	86
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Total	957
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C. PUPILS FOUND TO REQUIRE TREATMENT.

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTIONS TO REQUIRE TREATMENT
(excluding Dental Diseases and Infestation with Vermin).

Group	For Defective Vision (excluding squint)	For any of the other conditions recorded in Table IIA	Total individual pupils
(1)	(2)	(3)	(4)
Entrants	1	56	57
Second Age Group	6	28	34
Third Age Group	16	16	32
Total	23	100	123
Other Periodic Inspections ...	—	—	—
Grand Total	23	100	123

*See Scheme for Medical Inspection on page 1.

TABLE II

A. Return of Defects found by Medical Inspection during the Year.

Defect Code No.	Defect or Disease (1)	PERIODIC INSPECTIONS No. of Defects		SPECIAL INSPECTIONS No. of Defects	
		Requiring treatment (2)	Requiring to be kept under observation but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation but not requiring treatment (5)
4.	Skin	13	40	14	—
5.	Eyes—				
	(a) Vision ...	23	5	—	—
	(b) Squint ...	7	6	5	—
	(c) Other ...	1	5	15	—
6.	Ears—				
	(a) Hearing ...	—	2	—	—
	(b) Otitis Media	4	8	14	8
	(c) Other ...	—	—	7	—
7.	Nose or Throat ...	38	145	9	14
8.	Speech	3	1	7	—
9.	Cervical Glands ...	—	9	—	—
10.	Heart and Circulation ...	3	5	—	15
11.	Lungs	4	20	3	9
12.	Developmental—				
	(a) Hernia ...	—	1	4	—
	(b) Other ...	—	—	—	—
13.	Orthopaedic—				
	(a) Posture ...	—	8	—	5
	(b) Flat Foot ...	19	28	18	—
	(c) Other ...	8	5	4	1
14.	Nervous System—				
	(a) Epilepsy ...	—	—	—	—
	(b) Other ...	—	3	12	6
15.	Psychological—				
	(a) Development	—	—	4	—
	(b) Stability ...	—	1	—	2
16.	Other	—	—	—	—

B. Classification of the General Condition of Pupils Inspected during the Year in the Age Groups.

AGE GROUPS.	No. of pupils in- spected	(A) (Good)		B (Fair)		C (Poor)	
		No.	% of col 2	No.	% of col 2	No.	% of col 2
Entrants (1)	(2) 517	(3) 299	(4) 57.85	(5) 215	(6) 41.68	(7) 3	(8) .49
Second Age Group	449	305	68.84	137	30.95	1	.21
Third Age Group	286	250	87.42	36	—	12.58	—
Other Periodic Inspections ..	—	—	—	—	—	—	—
Total	1,246	854	68.54	388	31.14	4	.32

TABLE III.

Infestation with Vermin.

Included in Table III on page 20.

TABLE IV.

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS).

Group I.—Diseases of the Skin (excluding uncleanness, for which see Table III).

										Number of cases treated or under treatment during the year	
										By the Authority.	Otherwise.
Ringworm—	(i) Scalp	...	...	...	...	...	...	...	...	—	—
	(ii) Body	...	...	...	...	...	...	...	...	4	—
Scabies	...	...	...	...	...	...	...	...	...	—	—
Impetigo	...	...	...	...	...	...	...	...	...	14	—
Other skin diseases	...	...	...	...	...	...	...	...	...	124	—
Total										142	—

Group II.—Eye Diseases, Defective Vision and Squint.

						Number of cases dealt with.	
						By the Authority.	Otherwise.
External and other, excluding errors of refraction and squint						13	—
Errors of Refraction (including squint)						497*	—
Total						510	—
Number of pupils for whom spectacles were—							
(a) Prescribed						280*	—
(b) Obtained						Not known	—

Group III.—Diseases and Defects of Ear, Nose and Throat.

						Number of cases treated.	
						By the Authority.	Otherwise.
Received operative treatment—							
(a) for diseases of the ear						—	2
(b) for adenoids and chronic tonsillitis						—	63
(c) for other nose and throat conditions						—	5
Received other forms of treatment						110	5
Total						110	75

Group IV.—Orthopaedic and Postural Defects.

(a) Number treated as in-patients in hospitals						Included in figures on page 21.	
						By the Authority.	Otherwise.
(b) Number treated otherwise, e.g., in clinics or out-patient departments						Included in figures on page 21.	

Group V. and VI.—Child Guidance Treatment and Speech Therapy.

						Number of cases treated.	
						By the Authority.	Otherwise.
Pupils treated—							
(a) under Child Guidance arrangements						—	—
(b) under Speech Therapy arrangements						Included in figures on page 21.	

Group VII.—Other Treatment Given.

							<i>Number of cases treated.</i>	
							<i>By the Authority.</i>	<i>Otherwise.</i>
(a) Miscellaneous minor ailments	...	...	...	...	...	...	891	—
(b) Other (specify)	...	...	...	...	...	...	—	—
Total							891	—

*Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

TABLE V.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

These details are included in the figures given in the Table on page 22.

Ebbw Vale Area of the Divisional Executive.

TABLE I

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools.

A. PERIODIC MEDICAL INSPECTIONS.*

Number of Inspections in the prescribed Groups:—

Entrants	...	...	...	...	...	...	...	...	...	556
Second Age Group	...	...	...	...	...	...	...	...	...	290
Third Age Group	...	...	...	...	...	...	...	...	...	558
Total	...	...	...	...	...	...	...	...	...	1,404
Number of other Periodic Inspections	...	...	...	...	...	...	...	...	...	292
Grand Total	...	...	...	...	...	...	...	...	...	1,696

B. OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	...	...	...	...	152
Number of Re-Inspections	...	...	...	...	...	...	...	...	288
Total	...	...	...	...	...	...	...	...	440

C. PUPILS FOUND TO REQUIRE TREATMENT.

**NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTIONS TO REQUIRE TREATMENT
(excluding Dental Diseases and Infestation with Vermin).**

Group (1)	For Defective Vision (excluding squint) (2)	For any of the other conditions recorded in Table IIA (3)	Total individual pupils (4)
Entrants	3	97	100
Second Age Group	24	27	49
Third Age Group	54	138	173
Total	81	262	322
Other Periodic Inspections	1	36	36
Grand Total	82	298	358

*See Scheme for Medical Inspection on page 1.

A. Return of Defects found by Medical Inspection during the Year.

TABLE II

Defects Code No.	Defect or Disease (1)	PERIODIC INSPECTIONS No. of Defects		SPECIAL INSPECTIONS No. of Defects	
		Requiring treatment (2)	Requiring to be kept under observation but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation but not requiring treatment (5)
4.	Skin	6	12	5	2
5.	Eyes—				
	(a) Vision ...	82	19	9	1
	(b) Squint ...	15	23	2	1
	(c) Other ...	5	9	4	—
6.	Ears—				
	(a) Hearing ...	4	4	4	1
	(b) Otitis Media	5	16	3	1
	(c) Other ...	16	12	5	—
7.	Nose or Throat ...	38	140	11	5
8.	Speech	9	17	13	1
9.	Cervical Glands ...	—	12	—	1
10.	Heart and Circulation ...	1	28	—	3
11.	Lungs	8	45	—	7
12.	Developmental—				
	(a) Hernia ...	1	6	1	1
	(b) Other ...	2	11	—	—
13.	Orthopaedic—				
	(a) Posture ...	4	13	1	—
	(b) Flat Foot ...	17	16	5	1
	(c) Other ...	14	27	12	2
14.	Nervous System—				
	(a) Epilepsy ...	—	3	—	3
	(b) Other ...	—	6	—	4
15.	Psychological—				
	(a) Development	—	3	—	2
	(b) Stability ...	—	1	1	2
16.	Other	153	24	15	3

Infestation with Vermin.

TABLE IV.

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS).

										Number of cases treated or under treatment during the year	
										By the Authority.	Otherwise.
Ringworm—	(i) Scalp	—	—
	(ii) Body	—	—
Scabies	—	—
Impetigo	—	—
Other skin diseases	13	—
		5	—
Total										18	—

Group II.—Eye Diseases, Defective Vision and Squint.

	Number of cases dealt with.	
	<i>By the Authority.</i>	<i>Otherwise.</i>
External and other, excluding errors of refraction and squint	10	—
Errors of Refraction (including squint)	430	—
Total	440	—
Number of pupils for whom spectacles were—	240	—
(a) Prescribed	Not known	—
(b) Obtained		

Group III.—Diseases and Defects of Ear, Nose and Throat.

	Number of cases treated.	
	<i>By the Authority.</i>	<i>Otherwise.</i>
Received operative treatment—		6
(a) for diseases of the ear	—	27
(b) for adenoids and chronic tonsillitis	—	5
(c) for other nose and throat conditions	15	2
Received other forms of treatment		
Total	15	40

Group IV.—Orthopaedic and Postural Defects.

(a) Number treated as in-patients in hospitals	7	
	<i>By the Authority.</i>	<i>Otherwise.</i>
(b) Number treated otherwise, e.g., in clinics or out-patient departments	—	125

Group V and VI.—Child Guidance Treatment and Speech Therapy.

	Number of cases treated.	
	<i>By the Authority.</i>	<i>Otherwise.</i>
Pupils treated—		
(a) under Child Guidance arrangements	Included in figures on page 21.	
(b) under Speech Therapy arrangements		

Group VII.—Other Treatment Given.

							Number of cases treated.	
							By the Authority.	Otherwise.
(a) Miscellaneous minor ailments	...	...	...	...	...	...	18	—
(b) Other (specify)—							—	—
Total							18	—

*Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

TABLE V.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

TABLE 100. BY THE AUTHORITY OF THE DENTAL OFFICERS—										
(1)	Number of pupils inspected by the Authority's Dental Officers—									
	(a) Periodic age groups	...	...	...	...	...	...	...	...	2,207
	(b) Specials	...	...	...	...	...	...	...	...	537
									Total (1)	2,744
(2)	Number found to require treatment									1,796
(3)	Number offered treatment									1,731
(4)	Number actually treated									1,315
(5)	Attendances made by pupils for treatment									1,331
(6)	Half-days devoted to : Inspection									15
									Treatment	158
									Total (6)	173
(7)	Fillings : Permanent Teeth									492
									Temporary Teeth	1
									Total (7)	493
(8)	Number of teeth filled: Permanent Teeth									417
									Temporary Teeth	1
									Total (8)	418
(9)	Extractions : Permanent Teeth									966
									Temporary Teeth	2,039
									Total (9)	3,005

(10)	Administration of general anaesthetics for extraction ...	...	...	...	...	...	...	1,027
(11)	Other operations: Permanent Teeth	...	...	...	...	...	...	2
	Temporary Teeth	...	...	...	...	...	...	—
							Total (11) ...	2

As previously reported the Education Act of 1944 directs that free medical treatment shall be provided for all pupils in attendance at Schools and County Colleges maintained by the Authority, whilst under the National Health Service Act of 1946 the free services of a family doctor are available to every child. All this has resulted in a very comprehensive scheme of medical attention for all school children and the valuable co-operation of general practitioners, consultant specialists and hospital staffs with your own medical, dental, nursing and other ancillary staff, is deserving of high praise. The large majority of parents are also most co-operative, although there are cases in which they show indifference to their child's health. In cases like these the tact and persuasion of the school nurse is invaluable and almost always effective.

I am grateful to my clerical staff for their consistent support and for their efficient, tactful and cheerful fulfilment of their duties.

My sincere thanks are due to the Chairman and Members of the Education Committee for their unfailing co-operation and assistance, and also to the Director of Education and his staff for the help rendered to my Department during the year.

I am,

Your Obedient Servant,

G. ROCYN JONES,

Principal School Medical Officer.

County Hall,

Newport, Mon.

June, 1956.